



January 5, 2020

Tax Incentive Programs Division
Maine Department of Economic and Community Development
59 State House Station
Augusta, ME 04333-0059

Dear Commissioner Johnson:

On behalf of Coffee Lovers, LLC, I am writing to make you aware we are considering an expansion. The new economic development project is vital to our 20-year-old business' growth. Specifically, we would be expanding our existing manufacturing facility located at 789 Court Street in Waterville. Your Pine Tree Development Zones (PTDZ) Program is the reason the project is under consideration. We estimate a \$3,456,000 real and personal property investment and creating 25 new, full-time positions with a \$55,000 annual average wage. At time of hire, all employees will have access to group health insurance and an ERISA-qualified retirement plan.

To be eligible to receive PTDZ benefits, we understand our future application must document: (A) the planned expansion's location; (B) our qualified business activity's eligible sector; and, (C) that net new jobs we create will be full-time and offer access to health insurance and a qualified retirement program.

We recognize we must hire at least one net new qualified employee above our employment base level within the first two years of receiving PTDZ certification. Qualified hires are new, full-time hires above the employment base level, who receive income derived from employment during the 2020 and/or 2021 calendar year(s), that exceed the annual per capita personal income for Kennebec County, the planned county of employment; and, who at time of hire have access to health insurance and a qualified retirement program.

Please be assured our economic development project would not occur within the State but for the PTDZ benefits availability. We also understand this letter's submission does not allow us to receive tax benefits but does permit us to submit a PTDZ application before December 31, 2020.

Sincerely,

Jane E. Smith

Jane E. Smith, President
Coffee Lovers, LLC
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STATE OF MAINE

_____, SS

_____, 2020

Personally appeared before me the above-named (Name of authorized business representative),
(Title of authorized business representative) of the (Name of Business seeking PTDZ Certification)
and acknowledged the foregoing instrument to be his/her free act and deed and his/her capacity and
the free act and deed of said (Name of Business seeking PTDZ Certification).

Signature of Notary Public/Attorney at Law

Printed Name: _____

Notary Commission Expires: _____